

DECLARATIONS (CONTINUED)

Businessowners Policy for CRIME STOPPERS
Policy Number 98-06-7513-8

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH DESCRIBED PREMISES

The coverages and corresponding limits shown below apply separately to each described premises shown in these Declarations, unless indicated by "See Schedule." If a coverage does not have a corresponding limit shown below, but has "Included" indicated, please refer to that policy provision for an explanation of that coverage.

COVERAGE	LIMIT OF INSURANCE
Accounts Receivable	
On Premises	\$10,000
Off Premises	\$5,000
Arson Reward	\$5,000
Collapse	Included
Damage To Non-Owned Buildings From Theft, Burglary Or Robbery	Coverage B Limit
Debris Removal	25% of covered loss
Equipment Breakdown	Included
Fire Department Service Charge	\$2,500
Fire Extinguisher Systems Recharge Expense	\$5,000
Forgery Or Alteration	\$10,000
Glass Expenses	Included
Increased Cost Of Construction And Demolition Costs (applies only when buildings are insured on a replacement cost basis)	10%
Money And Securities (Off Premises)	\$2,000
Money And Securities (On Premises)	\$5,000
Money Orders And Counterfeit Money	\$1,000
Newly Acquired Business Personal Property (applies only if this policy provides Coverage B - Business Personal Property)	\$100,000
Newly Acquired Or Constructed Buildings (applies only if this policy provides Coverage A - Buildings)	\$250,000

Prepared
 DEC 28 2012
 CMP-4000

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Ordinance Or Law - Equipment Coverage	Included
Outdoor Property	\$5,000
Personal Effects (applies only to those premises provided Coverage B - Business Personal Property)	\$2,500
Personal Property Off Premises	\$15,000
Pollutant Clean Up And Removal	\$10,000
Preservation Of Property	30 Days
Property Of Others (applies only to those premises provided Coverage B - Business Personal Property)	\$2,500
Signs	\$2,500
Valuable Papers And Records	
On Premises	\$10,000
Off Premises	\$5,000
Water Damage, Other Liquids, Powder Or Molten Material Damage	Included

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - PER POLICY

The coverages and corresponding limits shown below are the most we will pay regardless of the number of described premises shown in these Declarations.

COVERAGE	LIMIT OF INSURANCE
Loss Of Income And Extra Expense	Actual Loss Sustained - 12 Months

SECTION II - LIABILITY

COVERAGE	LIMIT OF INSURANCE
Coverage L - Business Liability	\$2,000,000

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Coverage M - Medical Expenses (Any One Person)	\$5,000
Damage To Premises Rented To You	\$300,000
AGGREGATE LIMITS	LIMIT OF INSURANCE
Products/Completed Operations Aggregate	\$4,000,000
General Aggregate	\$4,000,000

Each paid claim for Liability Coverage reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Coverage Form and any attached endorsements.

Your policy consists of these Declarations, the BUSINESSOWNERS COVERAGE FORM shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

FORMS AND ENDORSEMENTS

CMP-4102	*Businessowners Coverage Form
CMP-4247	*Amendatory Endorsement
CMP-4766	*Theft Deletion (Cov B Only)
CMP-4705	*Loss of Income & Extra Expnse
CMP-4779	*Employers Liability
CMP-4709	*Money and Securities
FE-6999.1	*Terrorism Insurance Cov Notice
CMP-4721	*Ex Personal Advertising Injury
CMP-4804	*Addl Insd Club Members
CMP-4795	*Addl Insd Designated Premises
CMP-4791	*Addl Insd State Political Perm
CMP-4788	*Addl Insd Mgrs Lessor of Prem
FD-6007	*Inland Marine Attach Dec
	* New Form Attached

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SCHEDULE OF ADDITIONAL INTERESTS

Interest Type: Addl Insured-Section II
Endorsement #: CMP4795
Loan Number: N/A

YAKIMA COUNTY
 COUNTY COMMISSIONERS
 PO BOX 12570
 YAKIMA WA 989092570

Interest Type: Addl Insured-Section II
Endorsement #: CMP4791
Loan Number: N/A

KITTITAS COUNTY
 205 W 5TH AVE STE 108
 ELLENSBURG WA 989262887

Interest Type: Addl Insured-Section II
Endorsement #: CMP4788
Loan Number: N/A

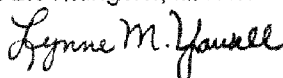
WASHINGTON STATE PATROL
 DEPT OF TRANSPORTATION
 BUREAU OF LAND MANAGEMENT
 US GOVERNMENT
 205 W 5TH AVE STE 108
 ELLENSBURG WA 989262887

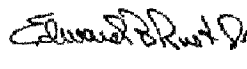
This policy is issued by the State Farm Fire and Casualty Company.

Participating Policy

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm Fire and Casualty Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.


 Secretary


 President

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